



FY18 Department Director Work and Performance Plan

THOMAS D. OWENS, MD - MEDICAL EXAMINER'S OFFICE



SECTION 1: DEPARTMENT KEY INITIATIVES

Key Initiative #1: Enhance Examinations and Autopsies Rate	
Link to Strategic Business Plan: Yes	
Description: Continue to meet the required examinations and autopsies under the jurisdiction of the ME system for Mecklenburg County and the regional counties covered under contract with the State of NC. This will ensure adequate Forensic services and stable revenue generation for the office. To account for administrative responsibilities, the Department Director caseload will be 50-70% of the full-time staff caseload.	
Rationale: There are currently two full-time and one limited part-time Forensic Pathologists in the office. The one Limited part-time position was created to offset the reduction in the Department Director's caseload. To remain within NAME standards and provide the necessary workforce to meet the demand for the caseload in the office, the Department Director will still be required to perform examinations and autopsies albeit at a reduced rate as compared to the full-time staff. Currently, the department director's caseload is 70% of that of a full-time Forensic Pathologist on staff. This rate may remain the same or may decrease to 50% based on the administrative demands of the Department Director position.	
Completion Date: Full year initiative, completion at end of FY18, but continues for each successive FY.	
Updates/Project Milestones: The caseload numbers for each Forensic Pathologist are calculated at the end of each month and adjustments are made in workload as necessary to meet the goal.	
Outcome/Measures: End of year reporting ONLY <ul style="list-style-type: none">Brief statement on if the project addressed the issue it was intended to address. If so, how.Statement on if project was completed at or below budget (update at end of fiscal year). If not, why?Statement on whether or not performance metric goals were met.	



Key Initiative #2: Train Full-Time Investigators to Receive ABMDI Certification

Link to Strategic Business Plan:

Yes

Description: Continued training of all current full time investigators to obtain the ABMDI certification. Begin process for all newly hired investigators (4 new investigators hired June 2017/July 2018)

Rationale: To provide for the best forensic services for Mecklenburg County and the surrounding region, including scene investigation within Mecklenburg County for homicides and suspicious deaths. Allows for collaborative but independent investigation along with the local law enforcement agencies.

Completion Date: Process began in FY17. 18-month long process, expected completion by end of FY18.

Updates/Project Milestones:

Current full time investigators

Apply for ABMDI certification training- February 2017

Completion of 50% of checklist- end of 1st quarter FY18

Completion of 75% of checklist- end of 2nd quarter FY18

Completion of 100% of checklist- end of 3rd quarter FY18

Take and pass examination for certification- end of 4th quarter FY18

Newly hired (end of FY17/beginning of FY18)

Apply for ABMDI certification training- 3rd quarter FY18

Complete 25% of checklist items- end of 4th quarter FY18

Outcome/Measures:

End of year reporting ONLY

- Brief statement on if the project addressed the issue it was intended to address. If so, how.
- Statement on if project was completed at or below budget (update at end of fiscal year). If not, why?
- Statement on whether or not performance metric goals were met.



Key Initiative #3: Complete Morgue Cooler Expansion

Link to Strategic Business Plan:

Yes

Description: Work on completion of the morgue cooler expansion. Look at options to increase current storage capacity in the immediate future and for long term (at least 10-15 years) 1) changing out the racking systems and tables for different system versus 2) constructing cooler addition and using current rack and table system versus 3) constructing cooler addition and changing out the racking system and tables.

Rationale: Based on population served as the ME Office and the County morgue, we are at full capacity almost daily with the significant increase in number of overdose deaths, the increase in homicides and other ME cases. The current racks and tables will accommodate 39 to 44 bodies. Based on College of American Pathologists recommendations, there should be space for one body in the morgue facility per every 15,000-population served. 2015 census data results indicate the need for 68 storage spaces for Mecklenburg County, plus additional spaces for the regional counties that we serve. While each county is required to have a county morgue/space for ME case examination, the regional counties send their autopsy cases to us and thus we require additional storage space (estimated at 20 spaces) to accommodate those cases as well. A larger cooler space would also allow for revenue generation through charging outside entities for body storage fees.

Completion Date:

TBD- ongoing process partially completed in FY 18, extends into and beyond FY 19

Updates/Project Milestones:

September 2017- Planning and bids for materials
 October 2017- Place order for materials
 March 2018 – Install new system
 End of FY19- Begin construction on cooler addition

Outcome/Measures:

End of year reporting ONLY

- Brief statement on if the project addressed the issue it was intended to address. If so, how.
- Statement on if project was completed at or below budget (update at end of fiscal year). If not, why?
- Statement on whether or not performance metric goals were met.



Key Initiative #4: Achieve NAME Accreditation

Link to Strategic Business Plan:

Yes

Description: Achieve National Association of Medical Examiners (NAME) accreditation for the office.

Rationale: NAME is the only organization that oversees the operation of Forensic Pathology services/facilities and issues guidelines for best practices. Accreditation indicates that the office is functioning in a manner that meets accepted best practice requirements.

Completion Date: Achieve accreditation by end of FY18.

Updates/Project Milestones:

Complete the review/updating of policies and procedures/coordinate with State ME Office- end of 2nd quarter
Apply for NAME accreditation- 3rd quarter
Undergo and pass inspection/receive the accreditation- end of FY 18

Outcome/Measures:

End of year reporting ONLY

- Brief statement on if the project addressed the issue it was intended to address. If so, how.
- Statement on if project was completed at or below budget (update at end of fiscal year). If not, why?
- Statement on whether or not performance metric goals were met.



Key Initiative #5: Enhance Collaborations with Community Partners

Link to Strategic Business Plan:

Yes

Description: Continue building collaborative working partnerships with other agencies involved in death investigation to provide highest level of service to the community. Provide training about the ME system and how the agencies can better work together for efficiency and clarity of information.

Rationale: Death investigations and handling of the remains involves several agencies including law enforcement, families, MEDIC, physicians, MEs in regional counties, hospitals, and funeral homes. New personnel are continuously entering the investigation of deaths and need training and education about the ME system, autopsies and other services we offer, and the limitations of the system.

Completion Date: Ongoing process, started in FY17, continues into FY19.

Updates/Project Milestones:

Continue to schedule training for various agencies throughout the year.
Coordinate with the State ME office for training of local/regional MEs.

Outcome/Measures:

End of year reporting ONLY

- Brief statement on if the project addressed the issue it was intended to address. If so, how.
- Statement on if project was completed at or below budget (update at end of fiscal year). If not, why?
- Statement on whether or not performance metric goals were met.

Key Initiative #6: Address 2017 Employee Climate Survey Results

Link to Strategic Business Plan:

No

Description: The 2017 ECS results showed several areas of concern with either mixed results or needs improvement ratings. The general areas include the Employee Development Measures related to Individual Development Plans, feedback on performance, and professional development opportunities; Employee Motivation and Satisfaction related to respect, assisting others, and treatment by supervisor; Department Director clearly communicating what is going on in the office, leading by example, and valuing employees; what to do in an emergency such as tornado or bomb threat; workplace security.

Rationale: FY17 presented many new changes and challenges with the expansion and growth of the office. These "growing pains" stemmed from our first year with full time investigator staff and 24/7 coverage, several vacancies, new business manager, and a new lead investigator/supervisor. With that came our first year of significantly lower scores in several areas on the ECS. Employees are the greatest resource and we need to take action to discover where the problems lie and find ways to address these concerns to make the office a better and more productive environment.

Completion Date:

Throughout the year as outlined below.

Updates/Project Milestones:

Address employee IDP – September (annual review)

Feedback – quarterly throughout the year and mid-year performance reviews

Professional development – as available throughout the year, complete investigator training for ABMDI

Communication – quarterly staff meetings, emails throughout the year to keep all staff updated regularly

Monthly- Share the monthly BOCC report with staff

Look into employees not feeling valued and make changes by December

Address what to do in emergency situations with new written policy immediately (by end of August)

Outcome/Measures:

End of year reporting ONLY

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- Statement on whether or not performance metric goals were met.